POLICY CHG. NO.	CATEGORY & TITLE	TOTAL FUNDS	FEDERAL FUNDS	STATE FUNDS
	ELIGIBILITY			
1	FAMILY PLANNING INITIATIVE	\$432,110,000	\$302,278,100	\$129,831,900
2	BREAST AND CERVICAL CANCER TREATMENT	\$125,395,000	\$69,069,650	\$56,325,350
3	CHDP GATEWAY - PREENROLLMENT	\$18,678,000	\$12,140,700	\$6,537,300
4	BRIDGE TO HFP	\$14,315,000	\$9,304,750	\$5,010,250
5	REFUGEES	\$5,846,000	\$0	\$5,846,000
6	PE FOR HFP DISENROLLEES	\$2,392,820	\$1,196,410	\$1,196,410
7	ELIG. FOR CHILDREN IN MONTH PRIOR TO SSI/SSP GRAN	\$1,675,240	\$837,620	\$837,620
8	SHIFT OF CCS STATE/COUNTY COSTS TO MEDI-CAL	\$1,500,000	\$750,000	\$750,000
9	BCCTP RETROACTIVE COVERAGE	\$27,940	\$18,160	\$9,780
15	ACCELERATED ENROLLMENT-SCHIP TITLE XXI	\$0	\$0	\$0
16	NEW QUALIFIED ALIENS	\$0	-\$113,334,500	\$113,334,500
17	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	\$28,174,050	-\$28,174,050
	ELIGIBILITY SUBTOTAL	\$601,940,000	\$310,434,940	\$291,505,060
	BENEFITS			
18	ADULT DAY HEALTH CARE - CDA	\$387,644,000	\$193,822,000	\$193,822,000
19	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$175,000,000	\$175,000,000	\$0
20	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$50,516,000	\$25,258,000	\$25,258,000
21	HUMAN PAPILLOMAVIRUS VACCINE	\$5,264,090	\$2,632,050	\$2,632,040
22	PRENATAL SCREENING EXPANSION	\$2,251,150	\$1,125,580	\$1,125,570
23	HOME TOCOLYTIC THERAPY	\$2,055,630	\$1,027,810	\$1,027,810
24	CONLAN V. BONTA	\$4,023,000	\$2,011,500	\$2,011,500
25	NEWBORN HEARING SCREENS EXPANSION	\$903,140	\$451,570	\$451,570
26	GENETIC DISEASE TESTING FEE INCREASE	\$759,070	\$379,540	\$379,540
27	NF A/B LEVEL OF CARE GROWTH	\$615,000	\$307,500	\$307,500
28	SELF-DIRECTED SERVICES WAIVER - CDDS	\$148,000	\$148,000	\$0
29	MONEY FOLLOWS THE PERSON DEMONSTRATION COST	\$87,000	\$65,000	\$22,000
30	NEW SERVICES FOR NF/AH & IHO WAIVERS	\$45,660	\$22,830	\$22,830
31	CDSS SHARE OF COST PAYMENT FOR IHSS	\$0	-\$4,056,500	\$4,056,500
32	FAMILY PACT STATE ONLY SERVICES	\$0	-\$2,500,000	\$2,500,000
33	SCHIP FUNDING FOR PRENATAL CARE	\$0	\$128,824,800	-\$128,824,800
34	MONEY FOLLOWS THE PERSON DEMONSTRATION SAVIN	-\$112,000	-\$56,000	-\$56,000
35	EXPANSION OF NF/AH WAIVER (SB 643)	-\$1,230,000	-\$615,000	-\$615,000
36	ADULT DAY HEALTH CARE REFORMS	-\$6,060,760	-\$3,030,380	-\$3,030,380
136	UNSPECIFIED BUDGET REDUCTION	-\$254,534,000	-\$117,816,500	-\$136,717,500
143	DISCONTINUE ADULT SPEECH THERAPY SERVICES	\$0	\$0	\$0
144	DISCONTINUE ADULT CHIROPRACTIC SERVICES	\$0	\$0	\$0
148	DISCONTINUE ADULT ACUPUNCTURE SERVICES	-\$54,860	-\$27,430	-\$27,430
149	DISCONTINUE ADULT PSYCHOLOGY SERVICES	\$0	\$0	\$0
150	DISCONTINUE ADULT PODIATRY SERVICES	\$0	\$0	\$0

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POLICY CHG. NO.	CATEGORY & TITLE	TOTAL FUNDS	FEDERAL FUNDS	STATE FUNDS
	BENEFITS			
154	DISCONTINUE ADULT OPTOMETRY/OPTOMETRIST SERV	\$0	\$0	\$0
155	DISCONTINUE ADULT OPTICIAN/OPTICAL LAB SERVICES	\$0	\$0	\$0
156	DISCONTINUE ADULT AUDIOLOGY SERVICES	\$0	\$0	\$0
157	DISCONTINUE ADULT OPTIONAL DENTAL SERVICES	-\$19,158,000	-\$9,579,000	-\$9,579,000
	BENEFITS SUBTOTAL	\$348,162,110	\$393,395,360	-\$45,233,250
	PHARMACY			
37	HIV/AIDS PHARMACY PILOT PROGRAM	\$0	-\$1,251,000	\$1,251,000
38	NON FFP DRUGS	\$0	-\$545,000	\$545,000
39	ENTERAL NUTRITION PRODUCTS	-\$1,122,320	-\$561,160	-\$561,160
40	NEW THERAPEUTIC CATEGORY REVIEWS/REBATES	-\$1,548,470	-\$774,230	-\$774,230
41	MEDICAL SUPPLY CONTRACTING	-\$2,095,510	-\$1,047,750	-\$1,047,750
42	MEDICAL SUPPLY REBATES	-\$4,000,000	-\$2,000,000	-\$2,000,000
44	AGED DRUG REBATE RESOLUTION	-\$9,000,000	-\$4,514,000	-\$4,486,000
45	FAMILY PACT DRUG REBATES	-\$32,734,000	-\$19,497,500	-\$13,236,500
46	DISPUTED DRUG REBATE RESOLUTIONS	-\$40,000,000	-\$20,250,400	-\$19,749,600
47	STATE SUPPLEMENTAL DRUG REBATES	-\$320,366,000	-\$160,681,400	-\$159,684,600
48	FEDERAL DRUG REBATE PROGRAM	-\$674,535,000	-\$338,317,100	-\$336,217,900
153	DISCONTINUE ADULT INCONTINENCE CREAMS & WASHE	-\$780,000	-\$390,000	-\$390,000
	PHARMACY SUBTOTAL	-\$1,086,181,290	-\$549,829,550	-\$536,351,740
	MANAGED CARE			
54	MANAGED CARE INTERGOVERNMENTAL TRANSFERS	\$66,362,000	\$33,181,000	\$33,181,000
57	MANAGED CARE EXPANSION - SAN LUIS OBISPO	\$11,179,000	\$5,589,500	\$5,589,500
58	MANAGED CARE EXPANSION - MARIN	\$9,233,000	\$4,616,500	\$4,616,500
59	RISK PAYMENTS FOR MANAGED CARE PLANS	\$8,000,000	\$4,000,000	\$4,000,000
60	COVERAGE FOR FORMER AGNEWS RESIDENTS	\$886,000	\$443,000	\$443,000
62	MANAGED CARE EXPANSION - PLACER	\$2,311,000	\$1,155,500	\$1,155,500
64	MANAGED CARE NEW QUALIFIED ALIENS ADJUSTMENT	\$0	\$29,869,600	-\$29,869,600
65	MANAGED CARE ELIGIBILITY ADJUSTMENTS	\$0	-\$823,000	\$823,000
66	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0
67	SBRHA CARVE-OUT OF AIDS DRUGS	-\$53,000	-\$26,500	-\$26,500
	MANAGED CARE SUBTOTAL	\$97,918,000	\$78,005,600	\$19,912,400
	PROVIDER RATES			
68	NF-B RATE CHANGES AND QA FEE	\$65,435,940	\$32,717,970	\$32,717,970
69	NON-CONTRACT HOSP. 10% INTERIM RATE RED.	\$37,636,950	\$18,818,480	\$18,818,480
70	LTC RATE ADJUSTMENT	\$16,879,100	\$8,439,550	\$8,439,550
71	ANNUAL MEI INCREASE FOR FQHCS/RHCS	\$14,934,820	\$7,467,410	\$7,467,410
72	HOSPICE RATE INCREASES	\$5,706,460	\$2,853,230	\$2,853,230
73	NF/AH (NF A/B LOC) WAIVER CAP INCREASE	\$4,973,530	\$2,486,770	\$2,486,770
74	DME REIMBURSEMENT CHANGES	\$2,506,740	\$1,253,370	\$1,253,370

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POLICY CHG. NO.	CATEGORY & TITLE	TOTAL FUNDS	FEDERAL FUNDS	STATE FUNDS
	PROVIDER RATES			
137	FAMILY PLANNING RATE INCREASE	\$28,041,000	\$21,982,000	\$6,059,000
147	REDUCTION TO PROVIDER PAYMENTS BY 10%	-\$66,826,000	-\$33,393,000	-\$33,433,000
158	REDUCTION TO NON-CONTRACT HOSP BY 10%	\$0	\$0	\$0
	PROVIDER RATES SUBTOTAL	\$109,288,540	\$62,625,780	\$46,662,770
	HOSPITAL FINANCING			
75	HOSP FINANCING - DSH PMT	\$1,617,872,000	\$1,032,149,500	\$585,722,500
76	HOSP FINANCING - PRIVATE HOSPITAL DSH REPLACEME	\$485,949,000	\$242,974,500	\$242,974,500
77	HOSP FINANCING - SAFETY NET CARE POOL	\$461,181,000	\$461,181,000	\$0
78	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT	\$284,284,000	\$142,142,000	\$142,142,000
79	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN CO	\$226,721,000	\$226,721,000	\$0
80	HOSP FINANCING - HEALTH CARE COVERAGE INITIATIVE	\$135,000,000	\$135,000,000	\$0
81	HOSP FINANCING - STABILIZATION FUNDING	\$100,903,000	\$50,451,500	\$50,451,500
82	HOSP FINANCING - SOUTH LA PRESERVATION FUND	\$80,396,000	\$80,396,000	\$0
83	HOSP FINANCING - DISTRESSED HOSPITAL FUND	\$64,998,000	\$32,499,000	\$32,499,000
84	HOSP FINANCING - DPH INTERIM RECONCILIATION	\$43,211,000	\$43,211,000	\$0
85	HOSP FINANCING - CCS AND GHPP	\$26,000,000	\$26,000,000	\$0
86	HOSP FINANCING - DPH INTERIM RATE GROWTH	\$9,337,000	\$4,668,500	\$4,668,500
87	HOSP FINANCING - NDPH SUPPLEMENTAL PMT	\$4,298,000	\$2,149,000	\$2,149,000
88	HOSP FINANCING - MIA LTC	\$0	\$14,743,000	-\$14,743,000
89	HOSP FINANCING - BCCTP	\$0	\$0	\$0
90	BASE ADJUSTMENT - DPH INTERIM RATE	\$0	\$375,315,500	-\$375,315,500
91	HOSP FINANCING - DPH RATE RECONCILIATION	-\$30,528,000	\$0	-\$30,528,000
	HOSPITAL FINANCING SUBTOTAL	\$3,509,622,000	\$2,869,601,500	\$640,020,500
	SUPPLEMENTAL PMNTS.			
92	CAPITAL PROJECT DEBT REIMBURSEMENT	\$127,945,000	\$63,972,500	\$63,972,500
93	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$125,000,000	\$125,000,000	\$0
94	IGT FOR NON-SB 1100 HOSPITALS	\$100,000,000	\$50,000,000	\$50,000,000
95	FREESTANDING CLINICS & VETERANS' HOMES SUPPL.	\$65,000,000	\$65,000,000	\$0
96	FFP FOR LOCAL TRAUMA CENTERS	\$44,530,000	\$22,265,000	\$22,265,000
97	CERTIFICATION PAYMENTS FOR DP-NFS	\$37,800,000	\$37,800,000	\$0
98	DSH OUTPATIENT PAYMENT METHOD CHANGE	\$12,500,000	\$6,250,000	\$6,250,000
99	SRH OUTPATIENT PAYMENT METHOD CHANGE	\$8,000,000	\$4,000,000	\$4,000,000
	SUPPLEMENTAL PMNTS. SUBTOTAL	\$520,775,000	\$374,287,500	\$146,487,500
	OTHER			
111	HEALTHY FAMILIES - CDMH	\$25,034,000	\$25,034,000	\$0
112	NURSE-TO-PATIENT RATIOS FOR HOSPITALS	\$18,105,000	\$9,052,500	\$9,052,500
115	MINOR CONSENT SETTLEMENT	\$9,098,000	\$0	\$9,098,000
119	TWO-PLAN MODEL NOTICES OF DISPUTE	\$1,000,000	\$0	\$1,000,000
121	ESTATE RECOVERY REGULATIONS	\$73,710	\$36,860	\$36,850

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POLICY CHG. NO.	CATEGORY & TITLE	TOTAL FUNDS	FEDERAL FUNDS	STATE FUNDS
	OTHER			
122	ANTI-FRAUD EXPANSION FOR FY 2004-05	\$0	\$0	\$0
123	INDIAN HEALTH SERVICES	\$0	\$6,000,000	-\$6,000,000
124	STATE-ONLY IMD ANCILLARY SERVICES	\$0	-\$36,000,000	\$36,000,000
125	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0
126	ANTI-FRAUD EXPANSION FOR FY 2006-07	\$0	\$0	\$0
127	NON-INSTITUTIONAL PROVIDER OVERPAYMENTS	\$0	-\$67,000,000	\$67,000,000
128	ANTI-FRAUD EXPANSION FOR FY 2005-06	\$0	\$0	\$0
130	MEDICAL SUPPORT ENHANCEMENTS	-\$704,130	-\$352,070	-\$352,060
131	ENHANCED RECOVERIES GENERATED BY DRA OF 2005	-\$1,006,420	-\$503,210	-\$503,210
132	DENTAL RETROACTIVE RATE CHANGES	-\$2,286,000	-\$1,143,000	-\$1,143,000
133	EDS COST CONTAINMENT PROJECTS	-\$3,201,800	-\$1,600,900	-\$1,600,900
134	ANTI-FRAUD EXPANSION FOR FY 2007-08	-\$22,399,620	-\$11,199,810	-\$11,199,810
138	ICF-DD TRANSPORTATION AND DAY CARE COSTS- CDDS	\$35,816,000	\$35,816,000	\$0
140	DELAY CHECKWRITE JUNE 2008 TO JULY 2008	-\$330,000,000	-\$165,000,000	-\$165,000,000
142	DISCONTINUE PART B PREMIUM FOR UNMET SOC BENES	-\$8,400,000	-\$4,200,000	-\$4,200,000
163	REDUCTION TO DEVEL. CTRS/STATE OP. SMALL FAC.	-\$794,000	-\$794,000	\$0
	OTHER SUBTOTAL	-\$279,665,250	-\$211,853,630	-\$67,811,630
	GRAND TOTAL	\$3,821,859,110	\$3,326,667,500	\$495,191,610